

## Filing at a Glance

Company: Old Republic National Title Insurance Company

Product Name: Short Form Residential Loan    SERFF Tr Num: LDRC-125238242    State: Arkansas  
Policy

TOI: 34.0 Title

SERFF Status: Closed

State Tr Num: AR-PC-07-025565

Sub-TOI: 34.0000 Title

Co Tr Num:

State Status:

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi,  
Llyweyia Rawlins, Brittany Yielding

Authors: Elise Reed, Heidi Majors

Disposition Date: 07-27-2007

Date Submitted: 07-24-2007

Disposition Status: Approved

Effective Date Requested (New): On Approval

Effective Date (New): 07-27-2007

Effective Date Requested (Renewal):

Effective Date (Renewal): 07-27-  
2007

## General Information

Project Name: ORT 4436

Status of Filing in Domicile: Authorized

Project Number:

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 07-27-2007

State Status Changed: 07-24-2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Replacement Form Filing. ORT 4436 replaces ORT 4312.

## Company and Contact

### Filing Contact Information

Elise Reed, Associate Regulatory Counsel

ereed@oldrepublictitle.com

400 Second Avenue South

(800) 328-4441 [Phone]

Minneapolis, MN 55401

(612) 371-1124[FAX]

### Filing Company Information

Old Republic National Title Insurance Company CoCode: 50520

State of Domicile: Minnesota

400 Second Avenue South

Group Code: 50520

Company Type: Title

Minneapolis, MN 55401

Group Name: Old Republic

State ID Number: 50520

(800) 328-4441 ext. 7061[Phone]

FEIN Number: 41-0579050

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## Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	\$50 per submission. This is one submission.
Per Company:	No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
500206446	\$50.00	07-23-2007

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	07-27-2007	07-27-2007

## **Disposition**

Disposition Date: 07-27-2007

Effective Date (New): 07-27-2007

Effective Date (Renewal): 07-27-2007

Status: Approved

Comment:

Rate data does NOT apply to filing.

Created by SERFF on 07-27-2007 02:21 PM

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Form	Short Form Residential Loan Policy	Approved	Yes

## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Short Form Residential Loan Policy	ORT 4436	06-06	Policy/CoveReplaced rage Form	4312	0.00	4436.pdf

# Short Form Residential Loan Policy

ONE-TO-FOUR FAMILY



Policy Number **SX**

Issued by Old Republic National Title Insurance Company

## SCHEDULE A

Name and Address of Title Insurance Company:

Policy No.:

Loan No.:

Address Reference: Street Address:

County and State:

Amount of Insurance: \$

Mortgage Amount: \$

Mortgage Date:

Date of Policy: at .

Name of Insured:

Name of Borrower(s):

The estate or interest in the Land identified in this Schedule A and which is encumbered by the Insured Mortgage is fee simple and is, at Date of Policy, vested in the borrower(s) shown in the Insured Mortgage and named above.

The Land referred to in this policy is described as set forth in the Insured Mortgage.

This policy consists of one page, including its reverse side, unless an addendum is attached and indicated below:

\_\_\_\_\_ Addendum attached

The endorsements checked below, if any, are incorporated in this policy:

\_\_\_\_\_ ALTA ENDORSEMENT 4-06

Condominium

\_\_\_\_\_ ALTA ENDORSEMENT 4.1-06

Condominium, if the Land or estate or interest is referred to in the Insured Mortgage as a condominium.

\_\_\_\_\_ ALTA ENDORSEMENT 5-06

Planned Unit Development

\_\_\_\_\_ ALTA ENDORSEMENT 5.1-06

Planned Unit Development

\_\_\_\_\_ ALTA ENDORSEMENT 6-06

Variable Rate, if the Insured Mortgage contains provisions which provide for an adjustable interest rate.

\_\_\_\_\_ ALTA ENDORSEMENT 6.2-06

Variable Rate-Negative Amortization, if the Insured Mortgage contains provisions which provide for both an adjustable interest rate and negative amortization.

*continued on back*

### OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY

*A Stock Company*

*400 Second Avenue South, Minneapolis, Minnesota 55401*

*(612) 371-1111*

\_\_\_\_\_  
*Authorized Officer or Agent*

By

*President*

Attest

*Secretary*

**ORT Form 4436**

ALTA Short Form Residential Loan Policy 6/07

One-To-Four Family

_____ ALTA ENDORSEMENT 7-06	Manufactured Housing, if a manufactured housing unit is located on the Land at Date of Policy.
_____ ALTA ENDORSEMENT 7.1-06	Manufactured Housing - Conversion; Loan
_____ ALTA ENDORSEMENT 8.1-06	Environmental Protection Lien-Paragraph b refers to the following state statute(s):
_____ ALTA ENDORSEMENT 9-06	Restrictions, Encroachments, Minerals
_____ ALTA ENDORSEMENT 14-06	Future Advance – Priority
_____ ALTA ENDORSEMENT 14.1-06	Future Advance – Knowledge
_____ ALTA ENDORSEMENT 14.3-06	Future Advance - Reverse Mortgage
_____ ALTA ENDORSEMENT 22-06	Location-The type of improvement is a one-to-four family residential structure and the street address is as shown above.

SUBJECT TO THE EXCEPTIONS FROM COVERAGE CONTAINED IN SCHEDULE B BELOW, AND ANY ADDENDUM ATTACHED HERETO, OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY, A MINNESOTA CORPORATION, HEREIN CALLED THE "COMPANY," HEREBY INSURES THE INSURED IN ACCORDANCE WITH AND SUBJECT TO THE TERMS, EXCLUSIONS AND CONDITIONS SET FORTH IN THE AMERICAN LAND TITLE ASSOCIATION LOAN POLICY (6-17-06), ALL OF WHICH ARE INCORPORATED HEREIN. ALL REFERENCES TO SCHEDULES A AND B SHALL REFER TO SCHEDULES A AND B OF THIS POLICY.

## **SCHEDULE B**

### **EXCEPTIONS FROM COVERAGE AND AFFIRMATIVE INSURANCES**

Except to the extent of the affirmative insurance set forth below, this policy does not insure against loss or damage (and the Company will not pay costs, attorney's fees, or expenses) which arise by reason of:

1. Covenants, conditions, or restrictions, if any, appearing in the Public Records; however, this policy insures against loss or damage arising from:
  - (a) the violation of those covenants, conditions, or restrictions on or prior to Date of Policy;
  - (b) a forfeiture or reversion of Title from a future violation of those covenants, conditions, or restrictions, including those relating to environmental protection; and
  - (c) provisions in those covenants, conditions, or restrictions, including those relating to environmental protection, under which the lien of the Insured Mortgage can be extinguished, subordinated, or impaired.

As used in paragraph 2(a), the words "covenants, conditions, or restrictions" do not refer to or include any covenant, condition, or restriction (a) relating to obligations of any type to perform maintenance, repair or remediation on the Land, or (b) pertaining to environmental protection of any kind or nature, including hazardous or toxic matters, conditions, or substances, except to the extent that a notice of a violation or alleged violation affecting the Land has been recorded or filed in the Public Records at Date of Policy and is not referenced in an addendum attached to this policy.

2. Any easements or servitudes appearing in the Public Records; however, this policy insures against loss or damage arising from (a) the encroachment, at Date of Policy, of the improvements on any easement, and (b) any interference with or damage to existing improvements, including lawns, shrubbery, and trees, resulting from the use of the easements for the purposes granted or reserved.
3. Any lease, grant, exception, or reservation of minerals or mineral rights appearing in the Public Records; however, this policy insures against loss or damage arising from (a) any affect on or impairment of the use of the Land for residential one-to-four family dwelling purposes by reason of such lease, grant, exception or reservation of minerals or mineral rights, and (b) any damage to existing improvements, including lawns, shrubbery, and trees, resulting from the future exercise of any right to use the surface of the Land for the extraction or development of the minerals or mineral rights so leased, granted, excepted, or reserved. Nothing herein shall insure against loss or damage resulting from subsidence.

**NOTICES, WHERE SENT:** Any notice of claim or other notice or statement in writing required to be given the Company under this policy must be given to the Company at the following address: 400 Second Avenue South, Minneapolis, Minnesota 55401-2499.



## **Rate Information**

Rate data does NOT apply to filing.

## Supporting Document Schedules

		<b>Review Status:</b>	
<b>Satisfied -Name:</b>	Uniform Transmittal Document- Property & Casualty	Approved	07-27-2007
<b>Comments:</b>			
<b>Attachment:</b>			
Uniform Trans.pdf			

## Property &amp; Casualty Transmittal Document

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b>	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

<b>3. Group Name</b>					<b>Group NAIC #</b>
<b>4. Company Name(s)</b>	<b>Domicile</b>	<b>NAIC #</b>	<b>FEIN #</b>	<b>State #</b>	

<b>5. Company Tracking Number</b>	
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

<b>6. Name and address</b>	<b>Title</b>	<b>Telephone #s</b>	<b>FAX #</b>	<b>e-mail</b>
<b>7. Signature of authorized filer</b>				
<b>8. Please print name of authorized filer</b>				

Filing information (see General Instructions for descriptions of these fields)

<b>9. Type of Insurance (TOI)</b>				
<b>10. Sub-Type of Insurance (Sub-TOI)</b>				
<b>11. State Specific Product code(s)(if applicable)[See State Specific Requirements]</b>				
<b>12. Company Program Title (Marketing title)</b>				
<b>13. Filing Type</b>	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)			
<b>14. Effective Date(s) Requested</b>	New:		Renewal:	
<b>15. Reference Filing?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>16. Reference Organization (if applicable)</b>				
<b>17. Reference Organization # &amp; Title</b>				
<b>18. Company's Date of Filing</b>				
<b>19. Status of filing in domicile</b>	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved			

## Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	
21.	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	

[illegible]

\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

**FORM FILING SCHEDULE**

(This form must be provided ONLY when making a filing that includes forms)

(Do not refer to the body of the filing for the forms listing, unless allowed by state.)

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>				
<b>2.</b>	<b>This filing corresponds to rate/rule filing number</b> (Company tracking number of rate/rule filing, if applicable)				
<b>3.</b>	<b>Form Name /Description/Synopsis</b>	<b>Form # Include edition date</b>	<b>Replacement Or withdrawn?</b>	<b>If replacement, give form # it replaces</b>	<b>Previous state filing number, if required by state</b>
01			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

PC FFS-1